

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000007166

1. Corporation Name

**ESTATES OF FORT LAUDERDALE - ITALIAN- AMERICAN C
LUB INC.**
FILED
99 OCT 20 AM 9:30
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

 2850 SW 54TH ST.
FT. LAUDERDALE FL 33312

Mailing Address

 2850 SW 54TH ST.
FT. LAUDERDALE FL 33312


9/10/99 90007/002-\$61.25

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		28 Suite, Apt. #, etc.		12/17/1998	
22 City & State		27 City & State		4. FEI Number	
23 Zip		29 Country		Applied For	
24		30		Not Applicable	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
DEPAULA, CARMEN 2787 SW 54TH ST. FT. LAUDERDALE FL 33312					
11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE <u>CARMEN DEPAULA PRES.</u>				DATE	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
CARMEN DEPAULA PRESIDENT 2787 SW 54TH STREET FT. LAUDERDALE FL 33312		Change Addition	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
VICE PRES. HELEN MARSALE 5531 LAGOON DRIVE FT. LAUDERDALE FL 33312		Change Addition	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TREASURER ROSE MARIE ROECKER 5870 SW 58TH AVENUE FT. LAUDERDALE FL 33312		Change Addition	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
Change Addition		Change Addition	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
Change Addition		Change Addition	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
Change Addition		Change Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
CARMEN DEPAULA PRESIDENT 2787 SW 54TH STREET FT. LAUDERDALE FL 33312		Change Addition	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
VICE PRES. HELEN MARSALE 5531 LAGOON DRIVE FT. LAUDERDALE FL 33312		Change Addition	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TREASURER ROSE MARIE ROECKER 5870 SW 58TH AVENUE FT. LAUDERDALE FL 33312		Change Addition	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
Change Addition		Change Addition	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
Change Addition		Change Addition	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
Change Addition		Change Addition	

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SIGNATURE: CARMEN DEPAULA SIGNATURE REQUIRED CARMEN DEPAULA 9/10/99 9549618313

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #